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PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Mar 20 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000018120 (3)

CAPPUCCINO EXPRESS ENTERPRISES INC. Mailing Address Principal Place of Business 7533 N.W. 51 PLACE 7533 N.W. 51 PLACE CORAL SPRINGS FL 33067 CORAL SPRINGS FL 33067 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/04/1994 2. Principal Place of Business 4. FEI Number 2a, Mailing Address Applied For 65-6480386 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Country 8. This corporation owes or has paid the current year Intangible Country Zip Personal Property Tax due June 30. 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MAISEL, GARY S 600 SOUTH ANDREWS AVENUE Street Address (P.O. Box Number is Not Acceptable) STE. 600 83 FORT LAUDERDALE FL 33301 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, theibove-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Stutes. Signature, typed or printed name of registered against and title if applicable (NOTE Registed Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 DELETE TLE TITLE Change Addition ADDERTON, ROBERT L AMF NAME 7533 N.W. 51 PLACE FREET ADDRESS STREET ADDRESS CORAL SPRINGS FL 33067 ITY-ST-ZIP CITY-ST-ZIP DELETE TLE Change Addition TITLE AME ADDERTON, DENISE S NAME 2 TREET ADDRESS 7533 N.W. 51 PLACE STREET ADDRESS **CORAL SPRINGS FL 33067** 2CITY-ST-ZIP CITY-ST-ZIP DELETE #ITLE Change Addition TITLE **3**VAME **ESTREET ADDRESS** STREET ADDRESS SCITY-ST-ZIP CITY-ST-ZIP DELETE TITLE Change Addition TITLE e NAME NAME ISTREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP DELETE THILE Change Addition TITLE 5. ME NAME 53 FET ADDRESS STREET ADDRESS 5.4 Y-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition TITLE 6.2 ME NAME

6.3 EET ADDRESS

8.4 Y-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the enption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate athat my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charges, or on an attachment with an address.